

Proposed PY 2016 Clinical Measure

Infection Monitoring:

NHSN Bloodstream Infection in Hemodialysis Patients

NHSN Bloodstream Infection in Hemodialysis Outpatients Lower Adjusted Ranking Metric (ARM) value desired	
Measure Description	Adjusted Ranking Metric (ARM) of Bloodstream Infection will be calculated among patients receiving hemodialysis at outpatient hemodialysis centers. Based on NQF #1460
Numerator	The observed number of new positive blood culture events based on blood cultures drawn as an outpatient or within 1 calendar day after a hospital admission and adjusted for vascular access type, unmeasured variation and patient exposure volume reported by a given facility to NHSN for the entire year.
Denominator	The number of positive blood culture events predicted to have occurred in a given facility for the entire year. Calculation for this denominator incorporates the number of in-center hemodialysis patients treated in the outpatient hemodialysis facility for the year stratified by vascular access type. Exclusions: <ol style="list-style-type: none"> Facilities that do not offer in-center hemodialysis Facilities with a CCN open date after January 1, 2014
Data Source(s)	<ol style="list-style-type: none"> NHSN REMIS, CROWNWeb, and other CMS ESRD administrative data (form 2744 to obtain facility type and certification date)
Additional Information	<ol style="list-style-type: none"> Facilities are required to meet enrollment and training requirements, as specified at http://www.cdc.gov/nhsn/dialysis/enroll.html and http://www.cdc.gov/nhsn/Training/dialysis/index.html. Data are collected as specified by the NHSN Dialysis Event Surveillance Protocol: http://www.cdc.gov/nhsn/PDFs/pscManual/8pscDialysisEventcurrent.pdf. A positive blood culture is considered a new event and counted only if it occurred 21 days or more after a previously reported positive blood culture in the same patient. Patients receiving inpatient hemodialysis are excluded from the measure. Patients receiving home hemodialysis or peritoneal dialysis are excluded from the measure. Facilities who do not submit 12 months of accurately reported data receive zero points for the measure. For more information about the methodology used to calculate the Adjusted Ranking Metric (ARM), please see http://www.cdc.gov/nhsn/dialysis/ and http://www.cdc.gov/nhsn/PDFs/dialysis/NHSN-ARM.pdf.